

Request for Duplicate Diploma

Name: _____
(as you would like it to appear on the diploma)

Social Security Number: _____

Graduation Date: _____ **Birth Date:** _____

Degree received: _____

Honors received: _____
(if applicable)

Mail diploma to: _____

Phone: _____
(where you can be contacted)

of Diplomas: Please send me _____ duplicated diploma(s) @ \$50.00 each

Graduate's Signature: _____ **Date:** _____

Method of Payment: Check # _____ Money Order # _____

Master Card American Express Visa Discover

Name as shown on card: _____

Credit card #: _____

Expiration date: _____

Mailed requests should be sent to:

Office of Admissions and Records
Texas A&M University-Corpus Christi
6300 Ocean Drive
Corpus Christi, Texas 78412

If you need to reach us:

Phone: 361-825-2624 Fax: 361-825-5887

It will be approximately two weeks before you receive your diploma(s)